2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002058

FILED Mar 17, 2008 Secretary of State

Entity Name: THE DEERCREEK WOMEN'S ALLIANCE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

7938 MC LAURIN ROAD NORTH JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

7938 MC LAURIN ROAD NORTH JACKSONVILLE, FL 32256

FEI Number: 59-3568670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DONOFRIO, CAROL DONOFRIO, CAROL 10003 DEERCREEK CLUB RD. EAST 7938 MCLAÚRIN ROAD NORTH

JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 03/17/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MILKEY, BARBARA TOMKA, PATTY Name: Name:

10060 BISHOP LAKE WAY Address: 8214 CONDOVER COURT Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: () Delete Title: (X) Change () Addition GROSNICK, DEBBIE Name: Name: CURTIN, ELIZABETH

Address: 9949 ORCHARD HILLS ROAD Address: 9990 VINEYARD LAKE ROAD E City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

() Delete Title: Title: (X) Change () Addition SMITH, MARIE Name: RUTLAND, KAREN Name:

8263 PERSIMMON HILL LANE 10294 CYPRESS LAKES DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: () Delete Title: (X) Change () Addition

Name: HEACOX, DIANE Name: BERMAN, JYOTHI

11150 CHESTER LAKE ROAD WEST 10124 VINEYARD LAKE ROAD E Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JYOTHI BERMAN Т 03/17/2008